

INDIANA DEPARTMENT OF NATURAL RESOURCES

Official Geocaching Placement Permit

This permit is valid up to **12 months** from the date approved. After that date, the cache must be moved and a new location permit issued or removed from the premises.

Cache Owner Information:

Name _____

Address _____

Phone number _____ E-mail address _____

Cache name as listed on www.Geocaching.com: _____

Physical description of container _____

_____ "Official Geocache" Label _____ Water resistant _____ Attach photograph to permit

Location coordinates on USGS 7.5 minute topographic map _____ WGS84 _____ NAD27 _____

Physical description of area _____

_____ I understand that caches not in compliance with the terms of this permit will be removed from the property and this permit voided for failure to comply.

_____ I understand that I am to monitor this cache monthly and maintain it to be family friendly.

I certify that all of the above information is correct to the best of my knowledge. I understand that I must know and follow all IDNR property regulations as well as the geocaching policy. I agree to remove this cache within one year of permit approval date. I will retain a copy of this permit for my records.

Signature of Applicant

Date

APPROVED

DENIED

Justification

Property Manager or Designee and Date

Property E-mail address

Date of Expiration _____